13-60137-RBK Doc#: 2 Filed: 02/11/13 Entered: 02/11/13 21:03:14 Page 1 of 8 2/11/13 9:04PM

B22C (Official Form 22C) (Chapter 13) (12/10)

In re	Sheryl L Lehmann	According to the calculations required by this statement:
	Debtor(s)	\square The applicable commitment period is 3 years.
Case Nu		■ The applicable commitment period is 5 years.
	(If known)	■ Disposable income is determined under § 1325(b)(3).
		\square Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. REPORT OF INCOME						
	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.						
1	a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.						
	b. Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income")	me'') for Lir	nes 2-10				
	All figures must reflect average monthly income received from all sources, derived during the six	Colum		Column B			
	calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.	Debto Incom		Spouse's Income			
2	Gross wages, salary, tips, bonuses, overtime, commissions.	\$ 2,	872.85	\$			
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV.						
	Debtor Spouse						
	a. Gross receipts \$ 0.00 \$						
	b. Ordinary and necessary business expenses \$ 0.00 \$						
	c. Business income Subtract Line b from Line a	\$	0.00	\$			
4	Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV. Debtor Spouse a. Gross receipts \$ 600.00 \$ b. Ordinary and necessary operating expenses \$ 0.00 \$						
	c. Rent and other real property income Subtract Line b from Line a	\$	600.00	\$			
5	Interest, dividends, and royalties.	\$	0.00				
6	Pension and retirement income.	\$	0.00	\$			
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.	\$	0.00	\$			
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:						
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$	\$	0.00	\$			

9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.				
	Debtor Spouse				
	a.	6 00	ν Φ		
	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9	\$ 0.0	90 \$		
10	in Column B. Enter the total(s).	\$ 3,472.8	\$		
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.	\$		3,472.85	
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT I	PERIOD			
12	Enter the amount from Line 11		\$	3,472.85	
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you c calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a re the household expenses of you or your dependents and specify, in the lines below, the basis for excincome (such as payment of the spouse's tax liability or the spouse's support of persons other than debtor's dependents) and the amount of income devoted to each purpose. If necessary, list addition on a separate page. If the conditions for entering this adjustment do not apply, enter zero. a. \$ b. \$ c. \$ \$ c. \$ \$	of your spouse, gular basis for cluding this the debtor or the			
	Total and enter on Line 13		\$	0.00	
14	Subtract Line 13 from Line 12 and enter the result.		\$	3,472.85	
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the enter the result.	number 12 and	\$	41,674.20	
16	Applicable median family income. Enter the median family income for applicable state and house information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy	court.)			
	a. Enter debtor's state of residence: MT b. Enter debtor's household size:	1	\$	41,443.00	
17	 Application of § 1325(b)(4). Check the applicable box and proceed as directed. □ The amount on Line 15 is less than the amount on Line 16. Check the box for "The application top of page 1 of this statement and continue with this statement. ■ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The application of page 1 of this statement and continue with this statement. 			•	
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSAB	LE INCOME	1		
18	Enter the amount from Line 11.		\$	3,472.85	
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expected debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the dependents) and the amount of income devoted to each purpose. If necessary, list additional adjust separate page. If the conditions for entering this adjustment do not apply, enter zero. a.	spenses of the income(such as debtor's			
	Total and enter on Line 19.		\$	0.00	
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.		\$	3,472.85	

21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.					20 by the number 12 and	\$	41,674.20	
22	Applic	able median family incon	e. Enter the amount fro	m Lin	ne 16.			\$	41,443.00
	Applic	ation of § 1325(b)(3). Che	ck the applicable box a	nd pro	oceed as	directed.			
23		e amount on Line 21 is mo 25(b)(3)" at the top of page						nined	under §
	☐ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is n 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Part								
		Part IV. Ca	ALCULATION (OF I	DEDU	CTIONS FR	OM INCOME		
		Subpart A: D	eductions under Sta	ndar	ds of th	e Internal Reve	enue Service (IRS)		
24A	Enter in applica bankru	al Standards: food, appar n Line 24A the "Total" amo ble number of persons. (T ptcy court.) The applicable r federal income tax return	ount from IRS National his information is availal number of persons is the	Standable a nur	lards for t <u>www.u</u> nber tha	Allowable Living sdoj.gov/ust/ or from two uld currently be a second currently be a seco	Expenses for the om the clerk of the be allowed as exemptions	\$	565.00
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.								
	Person	ns under 65 years of age		Pers	sons 65	years of age or old	der		
	a1.	Allowance per person	60	a2.	Allow	ance per person	144		
	b1.	Number of persons	1	b2.	Numb	er of persons	0		
	c1.	Subtotal	60.00	c2.	Subtot	al	0.00	\$	60.00
25A	Utilitie availab the nur	Standards: housing and uses Standards; non-mortgage le at www.usdoj.gov/ust/onber that would currently build the build be the build	expenses for the applic or from the clerk of the be allowed as exemption	able o ankru	county a uptcy co	nd family size. (Thurt). The applicabl	his information is e family size consists of	\$	379.00
25B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.								
		IRS Housing and Utilities				\$	971.00		
		Average Monthly Payment home, if any, as stated in L	ine 47	by you	ır	\$	1,220.47		
		Net mortgage/rental expen				Subtract Line b fr		\$	0.00
26	25B do Standar	Standards: housing and uses not accurately computered, enter any additional antion in the space below:	the allowance to which	you a	re entitl	ed under the IRS I	Housing and Utilities		
								\$	0.00

	Local Standards: transportation; vehicle operation/public transportation expense allowance in this category regardless of whether you pay the regardless of whether you use public transportation.			
	Check the number of vehicles for which you pay the operating expen	ses or for which the operating expenses are		
27A	included as a contribution to your household expenses in Line 7. \square			
	If you checked 0, enter on Line 27A the "Public Transportation" amo Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in th Census Region. (These amounts are available at www.usdoj.gov/ust/	e "Operating Costs" amount from IRS Local e applicable Metropolitan Statistical Area or	\$	236.00
27B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)			0.00
	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owner vehicles.) \square 1 \square 2 or more.			
28	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 1, as stated in Little result in Line 28. Do not enter an amount less than zero.	court); enter in Line b the total of the Averag	е	
	a. IRS Transportation Standards, Ownership Costs	\$ 0.00		
	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$ 0.00	,	
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$	0.00
29	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Little result in Line 29. Do not enter an amount less than zero.	court); enter in Line b the total of the Averag	е	
	a. IRS Transportation Standards, Ownership Costs	\$ 0.00		
	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$ 0.00		
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$	0.00
30	Other Necessary Expenses: taxes. Enter the total average monthly estate, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sales	come taxes, self employment taxes, social	\$	94.00
31	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.			24.00
32	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.			0.00
33	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49.			0.00
34	Other Necessary Expenses: education for employment or for a ph the total average monthly amount that you actually expend for educat education that is required for a physically or mentally challenged dep providing similar services is available.	tion that is a condition of employment and for		0.00
25	Other Necessary Expenses: childcare. Enter the total average mont	thly amount that you actually expend on	т	3.30
35	childcare - such as baby-sitting, day care, nursery and preschool. Do	\$	0.00	

36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.	\$ 0.00
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.	\$ 50.00
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$ 1,408.00
	Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 24-37	
39	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. a. Health Insurance \$ 19.32 b. Disability Insurance \$ 4.29	
	c. Health Savings Account \$ 0.00 Total and enter on Line 39	\$ 23.61
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$	
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.	\$ 0.00
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.	\$ 0.00
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.	\$ 0.00
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	\$ 0.00
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.	\$ 0.00
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.	\$ 0.00
46	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.	\$ 23.61

			Subpart C: Deductions for De	bt Payn	nent			
47	owr che sche case	n, list the name of creditor, id ck whether the payment inclued and as contractually due to	aims. For each of your debts that is secured entify the property securing the debt, state and the states of the st	the Averag aly Payme ollowing tl	ge Monthly int is the tothe the filing of	Payment, and tal of all amounts the bankruptcy		
		Name of Creditor	Property Securing the Debt	Mor	erage nthly ment	Does payment include taxes or insurance		
	a	. Flathead County	2251 Pintail CT Homestead Filed 10-18-2012, Flathead County Ashley Park PH7, S19, T28N, R21W, Lot 24, Parcel No. 0009065	\$		■yes □no		
	b	. Hsbc/Mscpi	2251 Pintail CT Homestead Filed 10-18-2012, Flathead County Ashley Park PH7, S19, T28N, R21W, Lot 24, Parcel No. 0009065			■yes □no		
			ims. If any of debts listed in Line 47 are se	1	Add Lines		\$	1,220.47
48	pay	ments listed in Line 47, in or as in default that must be paid following chart. If necessary. Name of Creditor	der to maintain possession of the property. In order to avoid repossession or foreclose, list additional entries on a separate page. Property Securing the Debt 2251 Pintail CT Homestead Filed 10-18-2012, Flathead County Ashley Park PH7, S19, T28N, R21W, Lot 24, Parcel No. 0009065	The cure a	amount wor nd total any	uld include any		
		Положность	0003003		,	Total: Add Lines	\$	337.14
49	pric	rity tax, child support and al	ty claims. Enter the total amount, divided imony claims, for which you were liable at , such as those set out in Line 33.				\$	0.00
		apter 13 administrative expense administrative expense	enses. Multiply the amount in Line a by the	amount i	n Line b, aı	nd enter the		
50	a. b.	Current multiplier for you issued by the Executive information is available the bankruptcy court.)	nly Chapter 13 plan payment. our district as determined under schedules Office for United States Trustees. (This at www.usdoj.gov/ust/ or from the clerk of	X		7.50		0.00
	c.		istrative expense of chapter 13 case		Aultiply Lii	nes a and b	\$	0.00
51	Tot	al Deductions for Debt Pay	ment. Enter the total of Lines 47 through 5				\$	1,557.61
50	T-4	ol of all doductions from '	Subpart D: Total Deductions f		come		¢	2,989.22
52	10t		come. Enter the total of Lines 38, 46, and 5		II IININI	ED 6 1225(1)/2	\$	2,303.22
53	Tot		EMINATION OF DISPOSABLE 1 Enter the amount from Line 20.	INCOM	E UNDI	LK § 1325(D)(2	(s) \$	3,472.85
55	Total current monthly income. Enter the amount from Line 20.					Ψ	J, 41 2.00	

54	\$	0.00		
55	\$	0.00		
56	Total of all deductions allowed under § 707(b)(2). Enter the	he amount from Line 52.	\$	2,989.22
	Deduction for special circumstances. If there are special circumstances is no reasonable alternative, describe the special circum. If necessary, list additional entries on a separate page. Total to provide your case trustee with documentation of these exports the special circumstances that make such expense necessary.	astances and the resulting expenses in lines a-c below. the expenses and enter the total in Line 57. You must benses and you must provide a detailed explanation		
57	Nature of special circumstances	Amount of Expense		
	a.	\$		
	b.	\$		
	c.	\$		
		Total: Add Lines	\$	0.00
58	Total adjustments to determine disposable income. Add the result.	he amounts on Lines 54, 55, 56, and 57 and enter the	\$	2,989.22
59	Monthly Disposable Income Under § 1325(b)(2). Subtract	Line 58 from Line 53 and enter the result.	\$	483.63
	Part VI. ADDITION	NAL EXPENSE CLAIMS		
	Other Expenses. List and describe any monthly expenses, no of you and your family and that you contend should be an ad 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a each item. Total the expenses.		ınder §	
60	of you and your family and that you contend should be an ad 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a	ditional deduction from your current monthly income useparate page. All figures should reflect your average Monthly Amount	ınder §	
60	of you and your family and that you contend should be an ad 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a each item. Total the expenses. Expense Description a.	ditional deduction from your current monthly income useparate page. All figures should reflect your average Monthly Amount \$	ınder §	
60	of you and your family and that you contend should be an ad 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a each item. Total the expenses. Expense Description a. b.	ditional deduction from your current monthly income useparate page. All figures should reflect your average Monthly Amount \$	ınder §	
60	of you and your family and that you contend should be an ad 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a each item. Total the expenses. Expense Description a. b. c.	ditional deduction from your current monthly income useparate page. All figures should reflect your average Monthly Amount \$ \$ \$ \$	ınder §	
60	of you and your family and that you contend should be an ad 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a each item. Total the expenses. Expense Description a. b. c. d.	ditional deduction from your current monthly income useparate page. All figures should reflect your average Monthly Amount \$ \$ \$ \$ \$ \$	ınder §	
60	of you and your family and that you contend should be an ad 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a each item. Total the expenses. Expense Description a. b. c. d. Total: Add Lin	ditional deduction from your current monthly income useparate page. All figures should reflect your average Monthly Amount \$ \$ \$ \$ \$ \$	ınder §	

Sheryl L Lehmann

(Debtor)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 08/01/2012 to 01/31/2013.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Rosauers

Income by Month:

6 Months Ago:	08/2012	\$2,643.33
5 Months Ago:	09/2012	\$2,643.33
4 Months Ago:	10/2012	\$2,643.33
3 Months Ago:	11/2012	\$2,643.33
2 Months Ago:	12/2012	\$2,643.33
Last Month:	01/2013	\$2,643.33
	Average per month:	\$2,643.33

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: S. CA United Food Worke Pension

Income by Month:

6 Months Ago:	08/2012	\$229.52
5 Months Ago:	09/2012	\$229.52
4 Months Ago:	10/2012	\$229.52
3 Months Ago:	11/2012	\$229.52
2 Months Ago:	12/2012	\$229.52
Last Month:	01/2013	\$229.52
	Average per month:	\$229.52

Line 4 - Rent and other real property income

Source of Income: **Julie Burk** Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	08/2012	\$600.00	\$0.00	\$600.00
5 Months Ago:	09/2012	\$600.00	\$0.00	\$600.00
4 Months Ago:	10/2012	\$600.00	\$0.00	\$600.00
3 Months Ago:	11/2012	\$600.00	\$0.00	\$600.00
2 Months Ago:	12/2012	\$600.00	\$0.00	\$600.00
Last Month:	01/2013	\$600.00	\$0.00	\$600.00
	Average per month:	\$600.00	\$0.00	
			Average Monthly NET Income:	\$600.00